SUPPLEMENT TO THE

BRITISH MEDICAL JOURNAL

LONDON SATURDAY NOVEMBER 14 1942

RECRUITMENT OF DOCTORS FROM NORTHERN IRELAND

Compulsory recruitment to the Services does not apply in Northern Ireland, but notwithstanding this fact the number of practitioners supplied to the Services from Northern Ireland compares most favourably with the number from England, Scotland, and Wales. Not only has Northern Ireland supplied on a voluntary basis its quota of general practitioners and specialists, but it has also contributed a large number of practitioners from its young practitioner pool.

Appeals are sent to Northern Ireland from the Central Medical War Committee from time to time, and these appeals never go unanswered. Although this is only what is to be expected from colleagues in Northern Ireland, tribute should be paid to their loyal and voluntary offers of service to the Central Medical War Committee ever since the outbreak of the war. A special word of thanks is due to the secretary of the committee, Dr. F. M. B. Allen.

PATIENTS ATTENDED UNDER THE E.M.S. SCHEME

Below is a statement by the Ministry of Health regarding the type of patients dealt with under the Emergency Medical Service scheme. This answers a question which some practitioners have been asking.

"Although designed primarily for air-raid casualties, the scheme made provision from the outset for such Service sick and casualties as could not be conveniently accommodated in Service hospitals, and for civil defence personnel injured on duty, together with civilian patients who had to be transferred from hospitals in the inner parts of large towns to outer hospitals because of the reduction of facilities at the inner hospitals, and unaccompanied evacuated children.

"When it appeared that air-raid casualties would not come up to expectations, much of the accommodation which had been drastically cleared of patients and reserved at the onset of the emergency was at once released for normal hospital purposes, and the organization of the scheme came to be utilized for various new types of war needs, namely: (1) Evacuees. Apart from the unaccompanied child, the scheme was extended to all those coming under any Government evacuation scheme, and later to all unofficial evacuees who made their own arrangements for temporary residence away from evacuation areas owing to the war. (2) War workers transferred from their homes to other areas and living in billets or lodgings. (3) Merchant seamen requiring hospital treatment away from home or injured on duty. (4) Fracture cases among war workers anywhere, whether transferred or in their home areas. (5) Civil defence whole-time workers transferred away from their home areas—whether for war service injury or not. (6) Women's Land Army, Home Guard, Air Training Cadets, and other miscellaneous groups.

"In the result air-raid casualties now form only a small proportion of the patients provided for under the scheme, and most of the day-to-day work is unaffected by the absence of air raids."

FIRE PREVENTION DUTIES

Standard of Fitness

For the guidance of all concerned the Ministry of Home Security has defined fire prevention duties. It has also devised a form of certificate for use by the medical referees appointed by the Ministry of Labour and National Service. The essential details are given here for the information of doctors generally.

Fire prevention duties are defined as the duty of (*a*) keeping a watch for the fall of incendiary bombs and for any outbreak of fire occurring as a result of hostile attack; (*b*) taking such steps as are immediately practicable to combat such a fire; (*c*) summoning such assistance as may be necessary; (*d*) being in readiness to perform any of the above duties. To combat such a fire a team of three persons is normally required, one of whom works a stirrup pump, another carries water to the pumper and acts as a relief pumper when required, and the third holds the nozzle of the hose of the stirrup pump and directs water from the nozzle towards the fire. Fires caused by incendiary attack usually occur on the upper floor of a building and sometimes in the roof and roof spaces.

The operations of working a stirrup pump, carrying water, and climbing stairs are those which the vast majority of persons who undertake fire prevention duties would be required to perform, and the standard as regards these items would be the same for men and women. In a relatively small proportion of instances persons may be asked to operate trailer pumps, to climb ladders, or to clamber over roofs; but for these more arduous activities volunteers from among the persons on duty are normally used. It is, of course, difficult to fix a standard, but if the normal standard were that required for the most arduous activities the result might be that very large numbers of persons who were fully capable of all fire prevention duties normally required of stirrup pump teams would be totally exempted from these duties.

The certificate to be used by medical referees is as follows:

I have to-day examined .....
and I hereby certify that in my opinion he/she is suffering from .....
.....

that he/she
- has/has not fair sight;
- has/has not fair hearing;
- is fit/unfit to work a stirrup pump;
- is fit/unfit to carry a bucket of water for 25 yards on level ground;
- is fit/unfit to climb two flights of stairs at a reasonable pace without distress;

and should be re-examined in.....months.

The standards indicated in this certificate should be borne in mind by doctors generally when they are asked to certify unfitness for fire prevention duties.

LAID-UP CARS

The B.M.A. has represented to the Ministry of War Transport the special claims of doctors in connexion with the proposed requisitioning of cars and tyres. In particular, the position of doctors in the Forces whose cars are temporarily laid-up and of doctors in civil practice who keep a spare car for use in emergencies has been explained. The matter is being examined by the authorities concerned, and all that can be stated at present is that when the requisitioning of private cars becomes necessary, consideration will be given to laid-up cars in the hands of members of the medical profession. A fuller statement will be published as soon as possible.

Correspondence

State Medical Service

SIR,—I deplore most earnestly the attitudes of Dr. W. B. J. Pemberton (*Supplement*, Oct. 17, p. 52) and Dr. W. N. Maple (*Supplement*, Oct. 31, p. 55) that the subject of State Medical Service be given a well-deserved rest. Are they content to sit back while the Ministry foists some fantastic bureaucratic scheme of medical service on to the medical profession and the public? It is this state of apathetic indifference evinced by the medical profession in general that permits the Ministry to take an unremitting advantage whenever it is convenient to do so. Indifference is an indefensible manner to assume and gives the Ministry greater scope to use its power, which is infinitely more authoritative during stress of war.

Already we have been told that the medical services of the country are so rotten that drastic changes have to be made. This is paradoxical when one knows that the health of the community has improved vastly during the past 20 years. Any ill-health or deficiencies in medical services that exist are mainly due to economic conditions, sanitation, housing, etc., and these are the direct concern of the Ministry, the public health officials, and the school medical service, and are not within the scope of the medical profession as a whole. This is corroborated by the fact that, since the beginning of this war, tuberculosis and contagious diseases have shown a disturbing increase.

One must whole-heartedly agree with Drs. Pemberton and Maple that the real job at the moment is winning this war, but, surely, meetings and discussions among the profession are not going to interfere with that. One must not forget that we are fighting for democracy.—I am, etc.,

Halifax. DONALD G. S. MACKAY.

Future of Medical Practice

SIR,—One wonders if some of your correspondents are aware of the implications of the recommendations of the Medical Planning Commission, the Insurance Acts Committee, and the Annual

Representative Meeting. These recommendations, it seems, can be summarized simply: (1) rejection of a full-time salaried medical service; (2) the extension to the dependants of insured patients of all the benefits of the National Health Insurance scheme. The adoption of the latter would, I am informed, bring 90% of the population within its scope. This means the end of private practice.

It would seem, then, that we should have a State service with all the disadvantages of the *ad hoc* scheme and none of its advantages—viz., an assured income and compensation for present-day practice values. Much though many of us dislike all that a full-time State service implies, it would seem preferable to the other. It is again the question of whether a bird in the hand is worth two in the bush. One looks to you, Sir, for a lead in such matters. Is this not the time to make the situation clear, not to the profession alone but to the Government? Memories are short, and so one may perhaps be permitted to remind your readers that despite the fact that the profession turned down the original National Health Insurance terms of service, nevertheless they became law. Recent correspondence with the Ministry, as reported in your columns, does not suggest that matters will be any different when the new terms of service are considered unless we act now.—I am, etc.,

Highgate, N.6. W. LEES TEMPLETON.

BRITISH MEDICAL ASSOCIATION

FORMATION OF NORTH BEDFORDSHIRE AND SOUTH BEDFORDSHIRE DIVISIONS

Notice is hereby given by the Council that from the date of this notice the Bedfordshire Branch will consist of two Divisions, whose designations and areas are as follows:

North Bedfordshire: Municipal Borough of Bedford; Urban Districts of Ampthill, Biggleswade, Kempston, and Sandy; Rural Districts of Ampthill, Bedford, and Biggleswade.

South Bedfordshire: Municipal Boroughs of Dunstable and Luton; Urban District of Leighton Buzzard; Rural District of Luton.

G. C. ANDERSON,
Nov. 6, 1942. *Secretary.*

Meetings of Branches and Divisions

NORTHERN IRELAND BRANCH: NORTH-EAST ULSTER DIVISION

A meeting of the North-East Ulster Division was held at Garvagh with Dr. T. ADAMS in the chair. Dr. F. P. Montgomery, president of the Branch, Dr. F. M. B. Allen, and other members from Belfast were also present. The interim report of the Medical Planning Commission was discussed, and it was agreed that the best form of medical service for the nation after the war would be a very liberal extension of the present panel system as set out in the report. The meeting was very decidedly against a complete State Medical Service. Dr. J. C. LYLE emphasized that the pensions of dispensary doctors must be safeguarded in any future medical service.

Branch and Division Meetings to be Held

NORTH OF ENGLAND BRANCH.—Joint meeting with Newcastle-upon-Tyne and Northern Counties Medical Society at Royal Victoria Infirmary, Newcastle-upon-Tyne, Thurs., Nov. 19, 7.15 p.m. Clinical demonstration: 8.45 p.m. Prof. F. C. Pybus: Recent Advances in Cancer Research. All members of H.M. Forces stationed in the area are invited to attend.

WESTMINSTER AND HOLBORN DIVISION.—At Westminster City Hall, Charing Cross Road, W.C. Thurs., Nov. 19, 8.15 p.m. Lieut. D. Moyer, U.S.A.M.C.: General Practice in America. All practitioners in area of Division are invited to attend.

B.M.A. LIBRARY

The following books were added to the Library during August and Sept., 1942:

Angyal, A.: Foundations for a Science of Personality. 1941.
Atkins, H. J. B.: After-treatment. 1942.
Bailey, H.: Demonstrations of Physical Signs in Clinical Surgery. Eighth edition. 1942.
Barber, C. H.: Tropical and Sub-tropical Diseases. 1942.
Beaumont, G. E.: Medicine. Fourth edition. 1942.
Bourne, A. W., and Williams, L. H.: Recent Advances in Obstetrics and Gynaecology. Fifth edition. 1942.
Brend, W. A.: Handbook of Medical Jurisprudence and Toxicology. Eighth edition. 1941.
Clapesattle, H. B.: The Doctors Mayo. 1941.
Clark, P. F., and Clark, A. S.: Memorable Days in Medicine. 1942.
Clay, H. H.: Sanitary Inspector's Handbook. Fifth edition. 1942.
Dahlberg, G.: Race, Reason and Rubbish. 1942.
De Gouveia, V.: Missao Médica ou Profissao Médica. 1942.
Ford, E. B.: Genetics for Medical Students. 1942.
Goldthwait, J. E., *et al.*: Body Mechanics in Health and Disease. Eighth edition. 1942.
Hadfield, G., and Garrod, L. P.: Recent Advances in Pathology. Fourth edition. 1942.
Haldane, J. B. S.: New Paths in Genetics. 1941.
Hanfmann, E., and Kasanin, J.: Conceptual Thinking in Schizophrenia. 1942.
Hinsie, L. E.: Visual Outline of Psychiatry. 1941.
Hume, E. E.: Ornithologists of the United States Army Medical Corps. 1942.
Jessner, L., and Ryan, V. G.: Shock Treatment in Psychiatry. 1942.
Katz, L. N.: Electrocardiography. 1941.
Katz, L. N.: Exercises in Electrocardiographic Interpretation. 1941.
Kracke, R. R.: Diseases of the Blood. Second edition. 1941.
Langdals-Kelham, R. D., and Perkins, G.: Amputations and Artificial Limbs. 1942.
Langstaff, J. B.: Doctor Bard of Hyde Park. 1942.
Lewis, G. G.: Ophthalmic Formulary. 1942.
Maximow, A. A., and Bloom, W.: Textbook of Histology. Fourth edition. 1942.
Piney, A., and Wyard, S.: Clinical Atlas of Blood Diseases. Fifth edition. 1942.
Read, G. D.: Revelation of Childbirth. 1942.
Sigerist, H. E. (Editor): Four Treatises of Theophrastus von Hohenheim called Paracelsus. 1941.
Ten Teachers: Diseases of Women. Seventh edition. 1942.
Thompson, C. J. S.: History and Evolution of Surgical Instruments. 1942.
Ustvedt, H. J.: Pulmonary Tuberculosis. 1942.
Vaughan, W. T.: Allergy: Strangest of All Maladies. 1942.
Wilkinson, M. C.: Non-pulmonary Tuberculosis. 1942.
Wright, Sir A. E.: Pathology and Treatment of War Wounds. 1942.

H.M. Forces Appointments

ROYAL NAVY

Surg. Lieut. B. Ridgway to be Surg. Lieut.-Cmdr.

ROYAL NAVAL VOLUNTEER RESERVE

Acting Surg. Lieut.-Cmdr. J. L. M. Wood to be Surg. Lieut.-Cmdr.

Prob. Temp. Surg. Lieuts. I. D. Leitch, A. M. Barnett, T. G. Paxon, A. B. Kennedy, J. P. Dewsbery, C. C. Evans, W. J. C. Markby, H. H. Nixon, J. E. Cursley, and A. R. Wear to be Temp. Surg. Lieuts.

ARMY

Col. F. R. B. Skrimshire, late R.A.M.C., having completed 4 years in the rank, is retained on the Active List supernumerary to the establishment.

Lieut.-Col. (temp. Col.) R. H. Alexander, M.C., from R.A.M.C., to be Col.

ROYAL ARMY MEDICAL CORPS

Major (War Subs. Lieut.-Col.) (temp. Col.) G. T. Garraway to be Lieut.-Col.

TERRITORIAL ARMY, R.A.M.C.

War Subs. Capt. G. C. Babington, from half-pay list, to be restored to full pay, retaining his present seniority.

Supern. for Service with Birmingham Univ. Senior Training Corps (Med. Unit).—H. P. Gilding to be Lieut.

LAND FORCES: EMERGENCY COMMISSIONS

ROYAL ARMY MEDICAL CORPS

War Subs. Capt. J. M. Lawrie has been placed on the half-pay list on account of ill-health.

War Subs. Capts. G. R. Anderson and F. K. B. Quanbrough have relinquished their commissions on account of ill-health and are granted the rank of Capt.

Lieuts. N. Levy and A. R. V. Patel have relinquished their commissions on account of ill-health and retain their rank.

To be Lieuts.: T. T. Ferguson, P. B. De Mare, H. E. Thackray, R. T. Campbell, E. R. L. Gregson, H. D. McCall, J. de Swiet, J. Anderson, N. S. Barnett, A. C. Barthels, W. M. Burgess, V. C. Benson, N. P. Bruce, S. R. M. Bushby, B. S. Cardell, R. Y. Carter, M. Caturani, H. D. Cockburn, D. C. Coull, J. W. A. Crabtree, J. Craig, D. H. Cutler, H. L. De Waal, J. O. W. Dick, I. G. B. Drybrough-Smith, B. I. Eames, B. K. Ellenbogen, A. W. G. Elliott, A. Elliot Smith, M. M. A. El Mishad, D. R. Evans, W. Forster, B. Gaunt, C. J. Glass, J. L. T. Graham, D. Granet, H. Grenville, J. E. H. Griffiths, R. B. Halford, M. Hall, W. H. Harris, J. H. Hilditch, J. B. Jayne, W. Johnson, S. L. Kaye, M. J. Keating, G. Kelham, B. Kelion, T. Kramer, G. L. Lambert, J. C. Leask, H. Lipman, D. C. Little, C. J. Livingstone, K. G. Lowe, B. S. Lush, R. MacG. McGowan, W. McKellar, J. H. MacLaughlin, D. H. Mackay, J. S. Mackay, P. L. F. Mortimer, S. W. K. Norris, E. R. Nurse, J. T. J. O'Reilly, R. F. G. Ormrod, G. E. Parker, H. C. Percy-Hughes, R. J. F. H. Pinsent, I. D. Riley, J. S. Rix, M. Rosten, J. O. Schofield, D. R. Seaton, J. Slorach, J. R. Smith, L. Smulian, G. O. Storey, D. A. Vyrnwy-Jones, R. H. Watson.

WOMEN'S FORCES

EMPLOYED WITH THE R.A.M.C.

War Subs. Capt. M. J. Thornton has relinquished her commission.

POSTGRADUATE NEWS

The Fellowship of Medicine announces: Brompton Hospital, M.R.C.P. clinical course, Mon. and Thurs., 4.30 p.m., from Nov. 17 to Dec. 10, on diseases of the chest; London Chest Hospital, M.R.C.P. clinical course, Mon., 10 a.m., and Fri., 2.30 p.m., Nov. 23 to Dec. 18, on diseases of the chest and heart.

WEEKLY POSTGRADUATE DIARY

BRITISH POSTGRADUATE MEDICAL SCHOOL, Ducane Road, W.—*Daily*, 10 a.m. to 4 p.m., Medical Clinics, Surgical Clinics and Operations, Obstetric and Gynaecological Clinics and Operations. *Daily*, 1.30 p.m., Post-mortems. *Mon.*, 2 p.m., Ear, Nose, and Throat Clinic. *Tues.*, 10 a.m., Paediatric Clinic; 11 a.m., Gynaecological Clinic; 2 p.m., Genito-urinary Clinic. *Wed.*, 11.30 a.m., Medical Conference; 2 p.m., Calcium Deficiency Diseases—II, by Dr. Donald Hunter. *Thurs.*, 2 p.m., Dermatological Clinic; 2.15 p.m., X-ray demonstration, Diseases of Bone (Inflammatory and Dystrophic), by Dr. E. J. E. Topham. *Fri.*, 12.15 p.m., Surgical Conference; 2 p.m., Gynaecological Conference; 2 p.m., Sterility Clinic.

FELLOWSHIP OF MEDICINE, 1, Wimpole Street, W.—*Brompton Hospital:* Tues. and Thurs., 4.30 p.m., M.R.C.P. clinical course.

DIARY OF SOCIETIES & LECTURES

ROYAL SOCIETY OF MEDICINE.—*Tues.*, 3.30 p.m. Section of Pathology. *Thurs.*, 2 p.m. Section of Dermatology; 2.30 p.m. Section of Neurology. *Fri.*, 3.30 p.m. Section of Obstetrics and Gynaecology; 4.45 p.m. Section of Radiology. *Sat.*, 11.15 a.m. Section of Physical Medicine.

SOCIALIST MEDICAL ASSOCIATION.—At Conway Hall, Red Lion Square, W.C., *Sat.* (Nov. 21), 2.30 p.m. Mr. W. C. W. Nixon: Nutrition.

BIRTHS, MARRIAGES, & DEATHS

The charge for inserting announcements under this head is 10s. 6d. This amount should be forwarded with the notice, authenticated with the name and address of the sender, and should reach the Advertisement Manager not later than first post Monday morning to ensure insertion in the current issue.

DEATHS

PRICE.—On Nov. 3, 1942, after a long illness, Lawrence Edwin Price, M.R.C.S., L.R.C.P., aged 63 years, dearly loved husband of Mary (*née* Hooson), late of "Red Roofs," Nuneaton, and of "Greenways," Crabbs Park, Paignton. Mayor of Nuneaton 1928-1930.

MARTIN.—On November 1, at Bath, Somerset, H. Meredith Martin, F.R.C.S., following a short illness.